

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

## NOTICE OF FILING / CLAIM FEE(S) DUE - (CALCULATION SHEET)

APPLICATION NUMBER: 09/591 706

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	<u>201/101</u>				<u>690.00</u>	=	<u>690.00</u>
Total Claims >20	<u>203/103</u>	<u>51</u>	-20 =	<u>31</u>	X		<u>17,000</u> = <u>558,000</u>
Independent Claims >3	<u>202/102</u>	<u>8</u>	-3 =	<u>5</u>	X		<u>78,000</u> = <u>390,000</u>
Mult. Dep Claim Present	<u>204/104</u>						<u>260,000</u> = <u>260,000</u>
Surcharge	<u>205/105</u>						<u>130,000</u> = <u>130,000</u>
English Translation	<u>139</u>						
<b>TOTAL FEE CALCULATION</b>							<u>2028,000</u>

Fees due upon filing the application.

Total Filing Fees Due = \$ 2028.00

Less Filing Fees Submitted - \$ \_\_\_\_\_

**BALANCE DUE** 2028.00

Dr Thomas  
 Office of Initial Patent Examination

Figure 7